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BLOFIELD & FLEGG RURAL DISTRICT COUNCIL



ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

including the report of the Senior Public Health Inspector

for the

YEAR 1959





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PUBLIC HEALTH DEPARTMENT, 1959

Medical Officer of Health:

G. R. HOLTBY, M.D., B.S., M.R.C.S, L.R.C.P, D.P.H., D.I.H.

Senior Public Health Inspector:

A. G. LAKE, A.M.I.P.H.E., A.R.S.H., M.A.P.H.I.

Deputy Public Health Inspector:

H. R. C. STRANGE, M.A.P.H.I.

Additional Public Health Inspector:

G. H. ALLISON, A.R.S.H., M.A.P.H.I.

Senior Clerk:

Mr. B. A. J. MUNRO

Junior Clerk:

Miss B. SEWELL

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RURAL DISTRICT COUNCIL OF BLOFIELD AND FLEGG

Council Offices,

To: The Chairman and Members of the Blofield and Flegg Rural District Council.

Ladies and Gentlemen,

I have the honour to present the Annual Report for the year 1959.

The Registrar General estimated the mid-year population as 34,420 compared with 33,800 last year. There were 426 live births and 468 deaths giving a natural decrease of 42.

The district remains a healthy one, and the longevity of the majority of the residents is well known.

The principal causes of death were again cardio-vascular disease and the cancers. The former may be considered a degenerative disease, that is, a disease of old age in many cases, but coronary thrombosis too frequently cuts short the career of men in their prime. The preventive value of exercise - the use of the feet rather than the motor car - and avoidance of a diet too rich in animal fat (the frying pan should be used sparingly) are the two main known facts concerned in prevention. The cancers are almost invariably painless in their early stages and to give modern methods their best chance diagnosis and treatment must be early. Unusual swellings, persistent hoarseness, changes in digestive and bowell habit and any unusual or persistent cough or bleeding from any site should be reported to the doctor directly. Such symptoms may well be harmless, but it is wise to make sure.

We have good cause to hope that the big effort put into immunisation against poliomyelitis will have very largely eliminated death and maiming from this cause. It is unfortunate that injury on the roads cannot be prevented in the same way. In England and Wales in 1958, 15 deaths a day were caused by motor vehicle accidents. The deaths due to drowning on the Broads and the sea which occur each year are equally lamentable.

Tetanus immunisation is now being carried out as a routine for infants by family doctors and at Infant Welfare Clinics by means of a triple vaccine giving protection against whooping cough and diphtheria as well as tetanus. School children who require a boost against diphtheria are offered tetanus immunisation at the same time. It is wise also for adults to be immunised against tetanus as there are no ill effect from the immunisation and although the risk of infection is only in the region of 1 in 65,000, nevertheless it is higher in East Anglia than elsewhere in the country.

One group of individuals who require immunisation urgently are those who following some injury are given a "shot" of ATS or serum to prevent tetamus arising from that injury. The latter may be given by the G.P. or hospital out-patient department and will give protection for about six weeks. This "passive" immunity then fades off and should be followed by "active" immunity conferred by immunisation. The Serum or ATS is not without risk because it contains foreign protein from horse serum and people can become sensitive to it particularly if it has to be given again after another injury. The material used for "active" immunisation on the other hand does not contain any serum, cannot lead to sensitivity and gives permanent immunisation when a full course with booster doses has been given. A full course is three injections with booster doses every five years. Those people who have had a course of injections do not require serum or ATS after a wound and they should inform their doctor of their injections if they consult him about an injury.

The attention given to immunisation against poliomyelitis and tetamus should not be allowed to distract from the importance of immunisation against diphtheria and vaccination against smallpox.

After such serious topics, the subject of dental decay may seem a trivial matter, but it is not. It is extremely serious because it can damage the health of the individual to a considerable extent and also because dental decay is so wide-spread as to be almost universal. The dental man-power, particularly that of the public dental services, is quite inadequate to cope with the problem of treatment, prevention is the only real answer.

Fluoridation of the water supply would help greatly, but until that is general the importance of cleaning the teeth should be repeatedly stressed. It would be a very good thing if we all cleaned our teeth after all meals and ate no sugar or starch between meals without cleaning them again. Finishing off a meal with a raw apple or raw carrot is a very sensible habit, and the "rinse and swallow" technique with water is the next best thing to cleaning the teeth, but the teeth should always be cleaned last thing every night.

Living in the country is generally speaking healthier than living in the town, although the common causes of incapacity for work, namely bronchitis, arthritis and rheumatism affect countryman as well as the townsman. Certain hazards are peculiar to the countryside. Raw milk, that is unpasteurised milk, is a possible source of undulant fever and of Q fever, but boiling will kill off these organisms. Another danger is that from empty containers of poisons used in agriculture. A great many of these are used throughout the countryside and it is possible for children and other members of the public to obtain them and in some cases come to harm from contents remaining inside.

In conclusion I would like to thank the Chairman and Members of the Public Health Committee for their support as in previous years, and the Clerk, Senior Public Health Inspector, and Members of the Public Health Department for their efficient help and painstaking work throughout the year.

I have the honour to remain, Ladies and Gentlemen,

Your obedient Servant,

G.R. HOLTBY,

Medical Officer of Health.

SECTION A.

NATURAL AND SOCIAL CONDITIONS.

Area - (in acres) 74,531. There are 33 parishes within the area which has its administrative centre at Acle. The major portion of the District is rural in character, Agriculture and Dairy Farming being the main industry. The District is a very popular summer resort catering for many thousands of visitors during the holiday season, the number increasing each year; it includes a large area of Broads and many miles of pleasant inland waterways. Some of the best beaches in the country are to be found on its eight miles of coastline which extends from the boundary of Great Yarmouth northwards to Horsey.

Population. The Registrar General has estimated the population for the mid-year 1959 as 34,420 giving a population density of 46 per acre.

SUMMARY OF VITAL STATISTICS

Area in acres		74,531
Population (Registrar-General's mid-June estimate)	• • •	34,420
No. of Inhabited Houses (1959) according to Ratebook		11,791
Rateable Value		
Estimated Net Produce of 1d. Rate		

NEO NATAL (first four weeks) -

	Male	Female	Total
Legitimate	2	2	4
Illegitimate		-	-
	entir turnet	-	
Total	2	2	4

Neo-natal Mortality rate (deaths under 4 weeks per 1,000 total live births) 9.16

Early neo-natal Mortality rate (deaths under 1 week per 1,000 total live births) - 7.04

Perinatal Mortality rate - 27.57

Illegitimate live births per cent of total live briths - 4.22%

MATERNAL MORTALITY -

Deaths associated with Pregnancy, Childbirth, Abortion -

Nil.

Maternal Mortality rate per 1,000 Live and Still Births -

0.00

DEATHS (all causes) -

Male	Female	Total
155	1 7 3	328

Death Rate per 1,000 of estimated resident population -

Blofield & Flegg R.D. Crude Death Rate 9.52 Standard Death Rate 6.28 England and Wales " " 11.6

BIRTH RATE, DEATH RATE AND ANALYSIS OF MORTALITY RATE FROM CERTAIN DISEASES IN THE YEAR 1959.

London and

Blofield

England

	and Wales.	other Towns.	ard Flegg R.D. (Standard Rates).
	Rates	per 1,000 Popul	ation.
Births:			
Live Births. Stillbirths.	16.5 20.9 (a)	17.3 19.3 (a)	14.24 20.7 (a)
Deaths:			
All causes (excluding Stillbirths).	11.6	11.9	6,28
Malignant Neoplasm lung, bronchus.	0.46	0,64	0,19
Whooping Cough.	•	ù	
Diphtheria.	-	-	-
Tuberculosis (all forms).	0.08	0.11	0.04
Influenza.	0.17	0.18	0,30
Acute Poliomyelitis.	-	-	-
Pneumonia.	0,60	0.82	0,69
Coronary and arterio- sclerotic heart disease.	1.87	1.89	1.54
	Rates	per 1,000 Live	Births.
Infant Mortality.			
All causes under 1 year.	22.2	22.3	9,39

⁽a) per 1,000 total (live and still) births.

INDIVIDUAL CAUSES OF DEATH.

	Male	Female	Total
1. Tuberculosis, respiratory	1		1
2. Tuberculosis, other	-	1	1
3. Syphilitic disease	-	1	1
4. Diphtheria		_	-
5. Whooping Cough	-	-01	-
6. Meningococcal infections	•	-	_
7. Acute Poliomyelitis	-		-
8. Measles	-	-	-
9. Other infective and parasitic diseases	••	-	_
10. Malignant neoplasm, stomach	7	4	11
11. Malignant neoplasm, lung, bronchus	10	-	10
12. Malignant neoplasm, breast	-	2	2
13. Malignant neoplasm, uterus	-	1	1
14. Other malignant & Lymphatic neoplasms	19	23	42
15. Leukaemia Aleukaemia	1	1	2
16. Diabetes	-	1	1
17. Vascular lesions of nervous system	18	43	61
18. Coronary disease, angina	35	18	53
19. Hypertension with heart disease	6	11	17
20. Other heart disease	54	68	122
21. Other circulatory disease	6	7	13
22. Influenza	9	7	16
23. Pneumonia	17	19	36
24. Bronchitis	9	4	13
25. Other diseases of respiratory system	2	<i>ы</i>	2
26. Ulcer of stomach and duodenum		2	2
27. Gastritis, enteritis and diarrhoea	-	2	2
28. Nephritis and Nephrosis	1	2	3
29. Hyperplasia of prostate	6	-	6
30. Pregnancy, childbirth, abortion	-	-	-
31. Congenital malformations	2	-	2
32. Other defined and ill-defined diseases	16	13	29
33. Motor vehicle accidents	3	-	3
34. All other accidents	7	6	13
35. Suicide	2	1	3
36. Homicide and operations of war			••
All causes	231	237	468
			

NOTIFICATIONS OF DEATHS RECEIVED FURING THE YEAR 1959

ACCORDING TO AGE GROUPS

			Male.	Female.	Total.
Und	er 1 year.		2	2	4
1 a	nd under 5	9	•••	-	-
5	" " 10		1	1	2
10	n n 20		2		2
20	" " 3 0		5	1	6
30			2	3	6 5
40	" " 50		5	5	10
57			26	13	39
60	" " 70		41	38	79
70			75	82	157
80			64	7 2	136
90	" 100		7	20	27
100	and over		1	•	1
	TOTA	LS	231.	237	468

INFANT MORTALITY (Under One Year)

Cause of Death.	Male.	Female.	Total.
Prematurity Prematurity with akelectosis Prematurity with toxaemia Spina bifida and exomphalos	- 1 1	1 1 -	1 1 1 1
TOTALS	2	2	4

VITAL STATISTICS OF THE DISTRICT FOR 1959 AND PREVIOUS YEARS COMPARATIVE TABLE WITH ENGLAND AND WALES FOR THE PAST FIVE YEARS.

	1955	1956	1957	1958	1959
Live Birth Rate (standardised) per 1,000 population.					
England and Wales. Blofield and Flegg R.D.	15.0 12.20	15.6 13.62	16.1 13.11	16.4 13.48	16.5 14.24
Still Birth Rate per 1,000 total (live and still) births.				i.	
England and Wales. Blofield and Flegg R.D.	23,2 27,47	22 , 9 31 , 33	22,5 20,62	21.6 20.22	20 .7 20 .7
Death Rate (standardised) per 1,000 population.					
England and Wales. Blofield and Flegg R.D. Infant Mortality Rate per 1.000	11.7 12.83	11.7 9.59	11.5 9.36	11.7 7,94	11.6 6.28
live Births. England and Wales. Blofield and Flegg R.D.	24.9 22.60	23 .8 12 .44	23 . 1 15 . 79	22.5 12.63	22.0 9.16

SECTION B.

GENERAL PROVISIONS OF THE HEALTH SERVICES.

Blofield and Flegg Rural District is included with Smallburgh Rural District and North Walsham Urban District to form No.1 Area of the Norfolk County Council, for the purpose of carrying out the duties for which the County Health Authority has accepted responsibility under the National Health Service Act. These include the Care of Mothers and Young Children, Midwifery Service, Home Nursing Service, Vaccination and Immunisation, Prevention of Illness Care and After Care, Domestic Help Service and Mental Health Service. Some of these services along with the School Health Service in the area are the responsibility of the Area Medical Officer who also acts as Medical Officer of Health of the three County Districts comprising Area No.1, referred to above (Tel. Norwich 22288). There are two Health Visitors and nine District Nurses with centres at the following places:—

Acle Blofield Caister	Conservative Hall Margaret Harker Hall Parish Hall	Last Tuesday each month. Last Thursday each month. Second and last Wednesday each month (Doctor attends last
		Wednesday).
Cantley	Village Hall	Third Tuesday each month.
Fleggburgh	Village Hall	First Friday each month.
Halvergate	Church Hall	Second Friday each month.
Hemsby	The Institute	Third Thursday each month.
Lingwood	Reading Room	Third Thursday each month.
Martham	Church Room	First Wednesday each month.
Ormesby	Church Hall	Second Friday each month.
Reedham	Church Hall	First Thursday each month.
South Walsham	Village Hall	Second Tuesday each month.
Thorpe (1)	Roxley	Second Thursday each month.
Thorpe (2)	St. John Ambulance	Second and last Wednesday
	Brigade Hut	each month to 29/4/59.
	St. Williams C.P.	Every Wednesday commencing
	School Horsa Block	6/5/59. (Doctor attends second Wednesday).
Winterton	Church Hall	Last Friday each month.

Doctor attends all Clinica where there is an attendance of 25 or over. Other Treatment Centres.

Treatment Cenures are held weekly as follows:-

		Local Heath Office, Aspland Rd. Norwich.	Thorpe (H.A) C.P. School.	Caister Parish Hall.
Child Guidance	Clinios	1	••	-
Dental Clinics		4	6	-
Minor Ailments	Clinic	••	1	-
Speech Clinic		4	-	1

The figures refer to the number of Clinics a week except the Minor Ailments Clinic which is held monthly.

General Welfare.

General Welfare services under the National Health Service Act, 1946, are administered in the district by the Local Welfare Officers of the County Council. These services include the provisions of Home Helps in cases of old age, sickness and maternity etc., and it was possible to provide Home Helps in almost every Parish of the district for necessitous cases.

Old People's Clubs have been established in the majority of Parishes in the district and there is no doubt that even an occasional afternoon meeting takes a great deal of monotony and loneliness out of old age.

The Local Welfare Officers have a contact point at Caisteron-Sea for the convenience of the public in that area and have acted in close co-operation with the Public Health and Housing Departments of the Council.

Ambulance Service.

This service is operated by the St. John Ambulance Brigade and British Red Cross Society as Agents of the County Council.

Vaccination and Immunisation.

This service is also the responsibility of the County Health Authority and is carried out by General Practitioners and by Assistant County Medical Officers.

Laboratory Facilities.

Facilities for Laboratory investigation are to be had at the Public Health Laboratory, Bowthorpe Road, Norwich, who are the suppliers of lymph for vaccination.

National Assistance (1948) Act, Section 47.

Nil cases.

Water Supply.

At the end of 1959, four parishes, Plumstead, Postwick, Scmerton and Clippesby continued to rely upon shallow wells for a supply of drinking water. A number of the wells in use are known to yield water unfit for consumption and residents have been advised accordingly, and it is expected that within the very near future the position will be remedied by the provision of a mains supply for these parishes.

During the year 150 samples were taken from well supplies for chemical and bacteriological analysis, and of these 84 were certified to be unfit for consumption. Action was taken in the case of unfit supplies and connections to the mains were made. It is doubtful whether the provision of stand pipes situated outside properties and serving groups of houses is in the best interests of all concerned, but nevertheless, this method has been used in a number of cases.

Sewerage.

During the year the Council decided to instal sewers in certain parished. Brundall and Blofield are to be dealt with first and they will be followed by those situated in the coastal area. The installation of sewers in these parishes will make it possible to improve the very unsatisfactory drainage arrangements which at present exist in many of the properties in these areas, and it will also encourage the installation of modern sanitary fittings and the consequent general improvement of properties within the area.

There is undoubtedly abundant proof of urgent need for sewers in the coastal parishes where many thousands of visitors spend their holidays. With the exception of Caister, where sewers are installed, all properties depend upon soakage for the ultimate disposal of sewage, and the concentration of large numbers of persons on small areas of land creates difficulties.

Collection and Disposal of Refuse.

A weekly collection from all pail closets within the area has been maintained throughout the year with strict regularity, but disposal of the wet refuse has continued to present something of a problem as farmers, generally, are reluctant to receive this material for use as a manure. Thanks are due to farmers who continue to be of assistance in this respect.

A more suitable type of tank is being provided by the Rivers Board for use in 1960, in connection with collection of wet refuse from riverside properties by boat. This will also provide satisfactory storage at the point of transfer from boat to vehicle which gave grounds for complaint during the summer of 1959.

Strict regulatity of the dry refuse collection service cannot be claimed. On occasions delay of 2 to 3 days beyond normal occurred but this is inevitable, due to fluctuation in population and the absence of spare labour and vehicles, coupled with the fact that the greatly increased population occurs during the period when the collectors take their annual holidays. Observation was kept and it would appear that there was no health hazard arising from the delay of collection. It is, however, desirable to provide a weekly service whereever possible, and this should be the aim for the future.

During 1959 8,109 tons of dry refuse were collected and disposed of. The arrangements for disposal in the coastal area are inadequate and unsatisfactory. Tipping takes place on land owned by a local farmer, and nuisances from this tip continue to give rise to complaints. The tip is being filled rapidly and another tip is a "must" in the not too distant future.

Dry refuse from Thorpe St. Andrew is disposed of by incineration, this while admittedly is more costly, is undoubtedly a very satisfactory and sanitary method of disposal. A similar installation in the coastal area would obviate the difficulties encountered year by year.

The service for the collection of dry refuse from the banks of rivers and broads continued throughout the year with good effect. The continued co-operation of boat owners and users has made this possible. The river banks remained free of litter and no complaints were received. The screens provided for use during the 1960 season will be a further step forward in the endeavour to ensure litter free banks of the rivers and broads.

Cesspool emptying is carried out upon request, the charge being 15/-d. per load for the first 12 loads, and 5/-d. per load thereafter from any single property. A charge of 21/-d. per load is made in the case of properties capable of being connected to a public sewer. Four cesspool emptiers were in use throughout the year and these vehicles were sufficient to cope with demand, but the dry summer undoubtedly played a part in this respect.

The disposal of liquid from cesspools continues to present a problem and in this respect the need for sewers and sewage disposal plants is evident. The influx of visitors from all parts of the country to the various camping sites and other holiday accommodation where drainage is to cesspool installations emphasises the need, as the potential danger from carriers of various infections is greater in the absence of sewers.

17 vehicles were in use and 37 men were employed throughout the year in connection with the cleansing services.

Prevention of Damage by Pests Act, 1949.

Two full time operators are employed by the Council and up to date methods of destruction, as recommended by the Ministry of Agriculture, Fisheries and Food, are used. During the year 2,310 premises were visited for the purpose of survey and destruction, and from observations it would appear that infestation within the area was kept under control. Poison baits prepared and sold ready for use to the public are believed to be partly responsible for the satisfactory position.

Moveable Dwellings.

During the year a number of caravans stationed within the area increased. There were 2,659 caravans stationed on 24 licensed sites. The exceptionally hot dry summer brought a large influx of campers into the District during the peak holiday period and it is believed the number will continue to increase in the future. Large sections of the populations of inland towns travelled to the coast for their holidays and almost overnight during the latter part of July hundreds of tents, vans etc., were found to have been erected or stationed on unlicensed sites. Sanitary accommodation of a temporary nature was provided but generally speaking was inadequate. These conditions existed however for a very limited period and no case of infectious disease or nuisance was reported from any of these sites.

This aspect of the holiday trade will need to be kept under strict observation. The provision of additional licensed sites would not necessarily solve the problem, as they become fully booked for the season and no accommodation remains for the casual camper or caravaner.

Public Conveniences.

The conveniences provided by the Council at Hemsby, Scratby, California and Caister-on-Sea were used to the fullest extent during the season. Further blocks are to be erected at Winterton, Hemsby and Thorpe St. Andrew. Those at Winterton have in fact been built and will be in use during the latter part of the season of 1960.

It is difficult to understand why these properties are abused. On occasions locks were ripped off, the doors, cisterns and pans broken, and it was found impossible to maintain toilet rolls in the compartments. Part time attendants are employed for duty at the conveniences.

SECTION D.

HOUSING.

The Council's "Unfit Houses" programme was temporarily slowed down by reason of the "Credit Squeeze". As a result of action under the Housing Act, Demolition Orders were made in respect of 16 properties and no Undertakings were accepted.

Council Houses.

The following is a list of houses erected by the Council:-

Under the Housing Acts: -

Pre-War	0 • •	•••	•••	•••	899
Post-War	• • •	• • • •	0 0 0	•••	853
Others	•••	•••	•••	• • •	, 14
					1,707

Of the above 36 dwellings were completed during the year in the following parishes:-

Thorpe	•••	•••		•••	12
Acle	•••	•••	•••	•••	24
					36

At the end of the year a further 14 dwellings were in course of construction and outstanding applications for Council house accommodation numbered 436.

INSPECTION AND SUPERVISION OF FOOD

Meat Inspection.

Two licensed slaughter houses were in use throughout the year. 877 beasts 1076 sheep and 2119 pigs were slaughtered and inspected. Neither premises complied with the standard as laid down in the Slaughter-house (Construction) Regulations, but one is to be replaced by new premises and in the second case repairs and improvements will be undertaken by the owner. The standard of cleanliness of the slaughterhouses was satisfactory and the quality of meat derived therefrom very good.

Milk.

Sampling is carried out by the staff of the Norfolk County Council and details of any infected supplies are forwarded to this office for action.

During the year 62 licences were issued authorising the special designation "Pasteurised" and 36 the special designation "Tuberculin Tested" in relation to milk sold within the area.

Food Premises.

Further progress was made in connection with the provision of washing facilities etc., in shops and other food premises and a good standard of cleanliness maintained. I would again mention that this applies particularly to the holiday camps where some thousands of visitors take their meals. Much work remains to be done in this field however, and as much time as can be spared by members of the staff is devoted to this work, and during the year 466 visits were made to food premises.

207 premises are registered as required by Section 16 of the Food & Drugs Act, 1955.

The one Ice-Cream Factory continued to operate satisfactorily. 26 samples of ice-cream were taken from retailers and action taken in respect of unsatisfactory samples.

A small quantity of unsound food was dealt with and samples taken wherever necessary for examination.

A summary of visits for inspection under various headings made by members of the staff during the year is as follows:-

Bakehouses.	5
Drains.	270
Dwellinghouses.	1100
Factories.	100
Food Preparing Premises.	137
Ice-Cream Premises.	3 7
Moveable Dwellings.	372
Nuisances.	41
Outworkers Premises.	-
Piggeries.	-
Public Cleansing.	632
Pests.	233
Conveniences.	186
Restaurants.	17
Refuse Tips.	262
Shops (re. meat etc.).	31
Slaughterhouses.	428
Special/Miscellaneous.	670

Carcases a <u>A</u> Offal inspected and condemned in whole or in part during 1959.

	Cattle			Sheep		
•	Excluding Cows.	Cows.	Calves.	and Lambs.	Pigs.	Horses.
Number killed (if know		.79	23	1076	2119	-
Number inspected	775	79	23	1076	2119	
All diseases except Tuberculosis and Cysticerci.						
Whole carcases					•	
condemned.	3	7	2	2	8	-
Carcases of which some part or organ				•		•
was condemned.	312	36	4	27	179	-
Percentage of the number inspected affected with disease other than tuberculosis and						
cysticerci.	40.65	54.43	26.08	2.69	8.81	**
Tuberculosis only						
Whole carcases						
condemned.	5	-	-	Testes	1	-
Carcases of which						
some part or organ was condemned.	37	**	-	44	63	-
Percentage of the						
number inspected affected with						
tuberculosis.	5.41	4	-	•••	2.97	-
Cysticercosis		~				
Carcases of which						
some part or organ was condemned.	9	1	P40	-	_	•
Carcases submitted to treatment by						
refrigeration.	9	1	-	Çeni,	•	~
Generalised and totally condemned.	••	-		-	••	-

SECTION F.

PREVENTION AND CONTROL OF INFECTIOUS AND OTHER NOTIFIABLE DISEASES.

NOTIFICATIONS (CORRECTED) DURING 1959, ACCORDING TO ACE GROUPS.

Scarlet Fever. Whooping Cough. Acute Poliomyelitis - Paralytic. Acute Poliomyelitis - Non-Paralytic. Measles (excluding Rubella). Diphtheria. Dysentery. Memingococcal Infection.	Under 1 yr.	1 yr. - - 16	2 yrs. 1 - - 19	3 yrs. 2 2 - 26 -	4 yrs. 3 1	5-9 yrs. 24 10 - 129 - 1	10-14 yrs. 8 - - 22 - 1		4 25 & over	Total 38 13 235 10 1
TOTALS	5	16	20	30	17	164	31	6	8	29 7
		Unde 5 yr	_	5-14 yrs.	15-44 yrs.	45 - yrs		65 & over.	Tot	al
Acute Pneumonia. Smallpox.		3		2 -	12	2	5	24	6	66
Acute Encephalitis - Infecti Acute Encephalitis - Post-In		rs. ⊶		-	_		_	_		
Enteric or Typhoid Fever.		-			-		-	-		-
Paratyphoid Fevers. Erysipelas.		-		1	2		1	1		5
Food Poisoning.		-		1	4	-	3	5	1	.3
Puerperal Pyrexia. Infective Hepatitis.		-		- 5	3 3		3		1	3 .1
Malaria.		-		-	1		-	-	-1.	1

INCIDENCE OF INFECTIOUS AND OTHER NOTIFIABLE DISEASES DURING 1959.

			QUARTERS		
	1st	2nd	* 3 r d	4th	Total
Scarlet Fever.	13	3	3	19	38
Whooping Cough.	•••	·· 4	2	7	13
Acute Poliomyelitis - Paralytic.	.•••	-	-	-	-
Acute Poliomyelitis - Non-Paralytic			-	-	-
Measles (excluding Rubella).	17	79	135	4	235
Diphtheria.	040	-	***	-	••
Dysentery.	2	-	1	7	10
Meningococcal Infection.	-	-	. ~	. 1	1
Acute Pneumonia.	36	11	4	15	66
Smallpox.	-	-	-	-	-
Acute Encephalitis - Infective.	-	-	-	- 0	
Acute Encephalitis - Post-Infectio	us•⇒	-	-		-
Enteric or Typhoid Fever.	-	•	-	-	-
Paratyphoid Fevers.	-	-		-	••
Erysipelas.	1	2	2		5
Food Poisoning.	1	4	8	_	13
Puerperal Pyrexia.	1	1	1	-	3
Infective Hepatitis.	2	5	4	-	1 1
Malaria.	-		•	1	1
TOTALS.	. 73	109	160	54	396

TUBERCULOSIS - NEW CASES NOTIFIED DURING 1959.

	Respiratory.		Meninge & C.N.S		Other.		Total.	
	Male.F	emale.	Male.Fe	emale.	Male.F	emale.		_
Under 5 years. 5 to 14 years. 15 to 24 years. 25 to 44 years. 45 to 64 years. 65 years and over.	1 1 3 3	1 2 1 -	-		1.131.1	-	2 1 6 4 1	
TOTALS	9	4	-	-	, 1,	-	14	

TUBERCULOSIS - NUMBER OF CASES ON REGISTER AT END OF 1959.

	Male.	0 1 10 1	Female.	Total.
Pulmonary.	118		84	202
Non-Pulmonary.	8	-	5	13
TOTALS	126		89	215

DETAILS OF NEW CASES OF TUBERCULOSIS FOR LAST FIVE YEARS. (Excluding Inward Transfers from other Districts).

	19	55	1056	1957	1958	1959
Pulmonary.	M 1	.2	6	8	8	9
	F 1	.0	8	8	5	4
Non-Pulmonary.	M			-	1	1
	F	1	1	2	1	-
TOTALS	2	3	15	18	15	14

DIPHTHERIA IMMUNISATION.

The following is the number of primary immunisations and booster injections given during the last five years in respect of Area 1.

Year.	Pri Under 1	mary II %	njections Age Ag 1 - 4	ge 5 - 14	Bocster Under 5	Injections Age 5 - 14	TOTALS.
1959	358	50	64	15	20	53	510
1958	305	44	6 1	9	53	55	483
1957	312	45	118	86	63	543	1122
1956	390	59	132	193	44	667	1426
1955	321	51	176	151	33	5 7 3	1254

VACCINATION AGAINST SMALLPOX.

Vaccination of children (under 5 years of age) during the last five years in Area No.1.

	1955	1956	1957	1958	1959
No. of live births registered. No. of vaccinations	631	662	685	694	713
recorded (0 - 4 years) Percentage vaccinated	311 49%	421 64%	445 65%	449 65%	3 7 5 53%

VACCINATION AGAINST POLIOMYELITIS

The following is the number of primary immunisations and booster injections given in Area 1 since the introduction of the scheme in 1956.

Year.	Primary. Children under 15 yrs.	Adult	Total	Children under		Total.
1959 1958 1957 1956	1759 6665 1166 167	2311 225 -	4070 6890 1166 167	5793 1707 	1231 - - -	7024 1707 -
TOTALS	9757	2536	12293	7 500	1231	8731

SECTION F.

MEASLES.

Measles again headed the list of notified infectious diseases with 235 cases as against 310 last year.

I mentioned in last year's report that work in the United States of America suggested that ultimately it would be possible to develop a suitable measles vaccine. Since then a vaccine has been prepared and is, I understand, under trial in a part of the U.S.A. It will probably be some time before one becomes available in this country, but ultimately we should have a vaccine to prevent this disease of childhood which is not without its complications, and can be a considerable nuisance.

PNEUMONIA.

66 cases were notified compared with 18 last year.

SCARLET FEVER.

38 cases were notified compared with 6 in 1938.

Scarlet Fever is a streptococcal infection and cannot be regarded with equanimity as one of the strains, Type 12, is frequently a cause of acute nephritis - inflammation of the kidneys; also rheumatic fever is a complication of some other cases. Notification of scarlet fever has been criticised while other streptococcal infections in the throat without a rash are not notifiable, but the diagnosis of scarlet fever is obvious because of the rash, and this gives an indication of the distribution of infection which would otherwise not be readily obtained.

WHOOPING COUGH.

13 cases were notified, the same as in 1958.

Immunisation against the disease is now becoming much more common and it is hoped that serious cases will become a rarity.

TUBERCULOSIS.

13 cases of pulmonary and 1 of non-pulmonary disease were notified, virtually the same as last year. The milk supply of the non-pulmonary case was investigated but found to be pasteurised.

FOOD POISONING.

13 cases were notified, the same as in 1958.

DYSENTERY.

10 cases were notified compared with only 1 the previous year.

POLIOMYELITIS.

It is a pleasure to report that no cases were notified. The immunisation campaign can take credit for this happy result.

FACTORIES ACTS, 1937 and 1948.

Part I of the Act.

(1) Inspection for purposes of provisions as to health (including inspections made by Public Health Inspectors).

	Number of Register	n Number of Inspection	s.written Occu	er of piers ecuted.
(i) Factories in which Sections 1,2,3,4, and 6 are to be enforced by Local Auths.	11	20	₩.	en)
(ii) Factories not included in(i) in which Section 7 isenforced by the Local Auth.	82	80		
(iii) Other premises in which Section 7 is enforced by Local Authorities (excluding outworkers premises).	- 9	7.7	-	-
TOTAL (2) Cases in which DEFECTS were for	102 ound	100	-	-
Particulars.	Found. Re	emedied. To Insp	Referred. H.M. By H.M. ector. Inspector.	Number of cases in which prose-cutions were instituted.
Want of Cleanliness (S.1).	H	-		
Overcrowding (S.2).	<u> </u>	<u> </u>	-	-
Unreasonable temperature (S.3).	-	-	⊶ ⊷	546
Inadequate ventilation (S.4). Ineffective draimge of floors (S.	R)		.	•••
Sanitary Conveniences (S.7)	.0, —			•
(a) Insufficient				***
(b) Unsuitable or defective	16	10	pag 200	***
(c) Not separate for sexes. Other offences against the	-	••	page page	**
Act (not including offences relating to Outwork).	-	-	pus 040	***
TOTAL	16	10		

PART VIII OF THE ACT

OUTWORK (SECTIONS 110 AND 111).

TOTAL	Cosaques, Christmas Crackers, Christmas Stockings etc.	Brush Making.	Wearing (Making etc. Apparel (Cleaning and	Nature of Work.
24	н	ı	1 %	No. of No. of No. of outworkers cases of prosecuin August default tions for list required in sending failure to by Section lists to supply listing (1)(c). the Council.
1	1	1	1 1	No. of N cases of p default t in sending f lists to sthe Council.
1	ı	ı	ī I	No. of No. of cases of prosecudefault tions for in sending failure to lists to supply lists. the Council.
1	1 .	1 .	1 1	No. of instan ces of work in unwhole-some premise
1	1	ı	; ı	Section 111 Notices served.
ı	1	ı	1 1	Prose- cutions.
		_	24	1.5



